



Name: _____ SSC ID: _____

Advisor: _____

Appeal Reason

- ☐ Cumulative GPA below 2.0
- ☐ Did not complete 67% of courses attempted (PACE)
- ☐ 150% beyond the published timeframe

My Goals (to be completed by student appealing)

My Academic Goal:

- ☐ Associate's Degree
- ☐ Transfer
- ☐ Certificate Program

My Career Goal: _____

My Major: _____

- ☐ Undecided

Expected Graduation Date: _____

My concerns about my ability to improve my GPA and/or PACE are:

- | | | |
|--|--|--|
| <input type="radio"/> Financial Difficulties | <input type="radio"/> Registered For Too Many Classes/Bad Time Management Skills | <input type="radio"/> Unclear Career Goals/ Not Sure Why I Am In School |
| <input type="radio"/> Transportation | <input type="radio"/> Ineffective Study Skills/ Unprepared For Exams | <input type="radio"/> Uncertain About Major/ Changed Major One Or More Times |
| <input type="radio"/> Work Demands | <input type="radio"/> Difficult Classes/Not Prepared For Course Level | <input type="radio"/> Unable to understand course content/relevance |
| <input type="radio"/> Child Care | | |
| <input type="radio"/> Medical/Disability | | |
| <input type="radio"/> Personal/Family Situation | | |
| <input type="radio"/> Other Concerns Not Listed Above: _____ | | |

Evaluation Of Academic Performance (to be completed by academic advisor.)

1. When did you begin advising this student? _____

2. Prior to today's meeting, was the college aware of any extenuating circumstances that may have hindered the student's past academic performance? If so, please comment:

Academic Plan: Financial Aid SAP Appeal

3. Per the Satisfactory Academic Progress requirements, students must meet the following academic requirements: 1) Must have a cumulative grade point average consistent with the academic standards for graduation and 2) Complete with a passing grade 67% of the courses attempted. Based upon the student's current academic record, what is your assessment of this student's potential to meet these requirements within the next few semesters?

4. DEGREE PLAN: Provide Degree Audit & Current Schedule.

Required Credit Hours remaining to complete degree requirements: _____

Semesters the student will be enrolled to complete the requirements: _____

Evaluation completed by (Please print): _____ Phone: _____

Academic Advisor Signature: _____ Date: _____

Student Acknowledgment

I understand that failing to earn the required GPA & PACE WILL jeopardize any future eligibility for financial aid.

_____ (Student Initials)

I understand that withdrawing from, or receiving an incomplete or failing grade in any course included in my academic plan WILL jeopardize my future eligibility for financial aid.

_____ (Student Initials)

I understand that I AM NOT able to revise my Academic Plan after the add/drop deadline.

_____ (Student Initials)

If you fail to meet the outlined requirements you will not qualify for future aid until you meet SAP standards on your own. You have the option to attend SSC and pay your tuition and fees using your own funds until you achieve SAP, without submitting an appeal.

Student Signature: _____ Date: _____

Academic Advisor Signature: _____ Date: _____